

Exhibit 21
BLACK WARRIOR MINERALS INC - AL UCC-1 FILINGS

Search Date: February 13, 2023



2020 Hurley Way, Suite 350 Sacramento, CA 95825
 Local: (916) 564-7800 Fax: (916) 564-7900 Toll Free: (800) 952-5696

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UCC Search Report

Type of Search	UCCs, Federal Tax Liens, State Tax Liens, and Judgments
Jurisdiction/Filing Office	State of Alabama, Secretary of State Uniform Commercial Code Division
Estimated Currency Date	Jan. 31, 2023
Last File Date	Feb 4 2023
Subject Search Name	BLACK WARRIOR MINERALS, INC.
Search Key Entered	BLACK* WARRIOR* MIN

Results

Based on a search of the indices of the Uniform Commercial Code Division of the Secretary of State of Alabama, there are no active liens of record other than those set out below. Liens reflected in this report were based on the searcher's individual search parameters, the search key entered, as well as the searcher's choice of the liens ultimately included or excluded herein. Certification can only be obtained through the office of the Alabama Secretary of State.

1. Financing Statement

Document No.	05-0603985	Lapses 8/8/2025
Filed	8/8/2005	
Debtor	BLACK WARRIOR MINERALS INC 4788 HIGHWAY 78 CORDOVA AL 35550	
Debtor	BLACK WARRIOR MINERALS, INC. PO BOX 1190 SUMITON AL 35148	
Secured Party	SERVISFIRST BANK P O BOX 1508 BIRMINGHAM AL 35201	
Amendment Type	Amendment	
File No.	05-0603985_1	
Filed	1/5/2010 12:00:00 AM	
Amendment Type	Amendment	
File No.	05-0603985_2	
Filed	1/11/2010 12:00:00 AM	
Amendment Type	Continuation	
File No.	05-0603985_4	
Filed	2/9/2010 12:00:00 AM	
Amendment Type	Amendment	
File No.	05-0603985_3	
Filed	2/9/2010 12:00:00 AM	

Amendment Type Continuation
File No. 05-0603985_5
Filed 3/10/2015 12:00:00 AM

Amendment Type Continuation
File No. 05-0603985_6
Filed 3/12/2020 12:00:00 AM

Amendment Type Termination
File No. 05-0603985_7
Filed 11/16/2021 12:00:00 AM

2. Financing Statement

Document No. 06-0263911
Filed 3/14/2006

Lapses 3/14/2026

Debtor BLACK WARRIOR MINERAL INC
P O BOX 1190
SUMITON AL 35148

Debtor BLACK WARRIOR MINERAL, INC.
P O BOX 1190
SUMITON AL 35148

Secured Party SERVISFIRST BANK
P O BOX 1508
BIRMINGHAM AL 35201

Amendment Type Amendment
File No. 06-0263911_1
Filed 1/5/2010 12:00:00 AM

Amendment Type Continuation
File No. 06-0263911_2
Filed 10/4/2010 12:00:00 AM

Amendment Type Continuation
File No. 06-0263911_3
Filed 10/15/2015 12:00:00 AM

Amendment Type Continuation
File No. 06-0263911_4
Filed 10/15/2020 12:00:00 AM

Amendment Type Termination
File No. 06-0263911_5
Filed 11/16/2021 12:00:00 AM

3. Financing Statement

Document No. 07-0009190
Filed 12/22/2006

Lapses 12/22/2026

Debtor BLACK WARRIOR MINERALS INC
4788 HIGHWAY 78
CORDOVA AL 35550

Debtor BLACK WARRIOR MINERALS, INC.
PO BOX 1190
SUMITON AL 35148

Secured Party SERVISFIRST BANK
P O BOX 1508
BIRMINGHAM AL 35201

Amendment Type Amendment
File No. 07-0009190_1
Filed 1/5/2010 12:00:00 AM

Amendment Type Continuation
File No. 07-0009190_2
Filed 7/7/2011 12:00:00 AM

Amendment Type Continuation
File No. 07-0009190_3
Filed 7/24/2016 12:00:00 AM

Amendment Type Continuation
File No. 07-0009190_4
Filed 7/26/2021 12:00:00 AM
Amendment Type Termination
File No. 07-0009190_5
Filed 11/16/2021 12:00:00 AM

4. Financing Statement

Document No. 07-0120250
Filed 2/8/2007

Lapses 2/8/2027

Debtor BLACK WARRIOR MINERALS INC
4788 HWY 78
CORDOVA AL 35550

Debtor BLACK WARRIOR MINERALS, INC.
PO BOX 1190
SUMITON AL 35148

Secured Party SERVISFIRST BANK
P O BOX 1508
BIRMINGHAM AL 35201

Amendment Type Amendment
File No. 07-0120250_1
Filed 1/5/2010 12:00:00 AM

Amendment Type Continuation
File No. 07-0120250_2
Filed 8/18/2011 12:00:00 AM

Amendment Type Continuation
File No. 07-0120250_3
Filed 9/10/2016 12:00:00 AM

Amendment Type Continuation
File No. 07-0120250_4
Filed 9/13/2021 12:00:00 AM

Amendment Type Termination
File No. 07-0120250_5
Filed 11/16/2021 12:00:00 AM

5. Financing Statement

Document No. 10-0049373
Filed 1/29/2010

Lapses 1/29/2025

Debtor BLACK WARRIOR MINERALS, INC.
4788 HIGHWAY 78
CORDOVA AL 35550

Secured Party SERVISFIRST BANK
P.O. BOX 1508
BIRMINGHAM AL 35201

Amendment Type Continuation
File No. 10-0049373_1
Filed 8/31/2014 12:00:00 AM

Amendment Type Continuation
File No. 10-0049373_2
Filed 8/31/2019 12:00:00 AM

Amendment Type Termination
File No. 10-0049373_3
Filed 11/16/2021 12:00:00 AM

6. Financing Statement

Document No. 11-7062703
Filed 4/5/2011

Lapses 4/5/2026

Debtor BLACK WARRIOR MINERALS, INC.
P.O. BOX 1190
SUMITON AL 35148

Secured Party SERVISFIRST BANK
850 SHADES CREEK PKWY, SUITE 200
BIRMINGHAM AL 35209

Amendment Type Continuation
File No. 11-7062703_1
Filed 11/6/2015 12:00:00 AM

Amendment Type Continuation
File No. 11-7062703_2
Filed 11/6/2020 12:00:00 AM

Amendment Type Termination
File No. 11-7062703_3
Filed 11/16/2021 12:00:00 AM

7. Financing Statement

Document No. 12-7063961
Filed 3/19/2012

Lapses 3/19/2027

Debtor BLACK WARRIOR MINERALS, INC.
P. O. BOX 1190
SUMITON AL 35148

Secured Party SERVISFIRST BANK
850 SHADES CREEK PKWY, SUITE 200
BIRMINGHAM AL 35209

Amendment Type Continuation
File No. 12-7063961_1
Filed 10/19/2016 12:00:00 AM

Amendment Type Continuation
File No. 12-7063961_2
Filed 10/21/2021 12:00:00 AM

Amendment Type Termination
File No. 12-7063961_3
Filed 11/16/2021 12:00:00 AM

8. Financing Statement

Document No. 14-7671555
Filed 8/28/2014

Lapses 8/28/2024

Debtor BLACK WARRIOR MINERALS, INC.
P.O. BOX 1190
SUMITON AL 35148

Secured Party SERVISFIRST BANK
850 SHADES CREEK PKWY, SUITE 200
BIRMINGHAM AL 35209

Amendment Type Continuation
File No. 14-7671555_1
Filed 3/30/2019 12:00:00 AM

Amendment Type Amendment
File No. 14-7671555_2
Filed 4/30/2019 12:00:00 AM

Amendment Type Termination
File No. 14-7671555_3
Filed 11/16/2021 12:00:00 AM

9. Financing Statement

Document No. 19-7480421
Filed 9/23/2019

Lapses 9/23/2024

Debtor BLACK WARRIOR MINERALS, INC.
P O BOX 1190
SUMITON AL 35148

Secured Party THOMPSON TRACTOR CO., INC.
P O BOX 10367
BIRMINGHAM AL 35202

Amendment Type Termination
File No. 19-7480421_1
Filed 12/14/2021 12:00:00 AM

10. Financing Statement

Document No. 19-7496966
Filed 10/1/2019
Lapses 10/1/2024

Debtor BLACK WARRIOR MINERALS, INC.
PO BOX 1190
SUMITON AL 35148

Secured Party THOMPSON TRACTOR CO., INC.
PO BOX 10367
BIRMINGHAM AL 35202

Amendment Type Termination
File No. 19-7496966_1
Filed 12/14/2021 12:00:00 AM

11. Financing Statement

Document No. 21-7610363
Filed 10/13/2021
Lapses 10/13/2026

Debtor BLACK WARRIOR MINERALS, INC.
4788 HIGHWAY 78
CORDOVA AL 35550

Secured Party JOHN DEERE CONSTRUCTION & FORESTRY COMPANY
6400 NW 86TH ST
JOHNSTON IA 50131

12. Financing Statement

Document No. 21-7694609
Filed 11/23/2021
Lapses 11/23/2026

Debtor BLACK WARRIOR MINERALS, INC.
4788 HIGHWAY 78
CORDOVA AL 35550

Secured Party CORPORATION SERVICE COMPANY AS REPRESENTATIVE
PO BOX 2576 UCCSPREP@CSCINFO.COM
SPRINGFIELD IL 62708

13. Financing Statement

Document No. 21-0601632
Filed 11/29/2021
Lapses 11/29/2026

Debtor BLACK WARRIOR MINERALS INC.
4788 HWY 78
CORDOVA AL 35550

Secured Party NEBARI NATURAL RESOURCES CREDIT FUND I, LP
130 5TH AVENUE, FIFTH FLOOR
NEW YORK NY 10011

Amendment Type Termination
File No. 21-0601632_1
Filed 5/24/2022 12:00:00 AM

14. Financing Statement

Document No. 22-7064124
Filed 2/7/2022
Lapses 2/7/2027

Debtor BLACK WARRIOR MINERALS, INC.
P.O. BOX 1190
SUMITON AL 35148

Secured Party CATERPILLAR FINANCIAL SERVICES CORPORATION
2120 WEST END AVENUE
NASHVILLE TN 37203

15. Financing Statement

Document No. 22-7068201 **Lapses** 2/9/2027
Filed 2/9/2022

Debtor BLACK WARRIOR MINERALS, INC.
4788 HIGHWAY 78
CORDOVA AL 35550

Secured Party CORPORATION SERVICE COMPANY, AS REPRESENTATIVE
PO BOX 2576UCCSPREP@CSCINFO.COM
SPRINGFIELD IL 62708

Secured Party FIRST-CITIZENS BANK & TRUST COMPANY
10201 CENTURION PARKWAY NORTH, SUITE
JACKSONVILLE FL 32256

Amendment Type Assignment
File No. 22-7068201_1
Filed 9/21/2022 12:00:00 AM

16. Financing Statement

Document No. 22-7135486 **Lapses** 3/14/2027
Filed 3/14/2022

Debtor BLACK WARRIOR MINERALS, INC.
PO BOX 1190
SUMITON AL 35148

Secured Party NOREAST CAPITAL CORPORATION
428 FOURTH STREET, SUITE 1
ANNAPOLIS MD 21403

17. Financing Statement

Document No. 22-7306693 **Lapses** 5/20/2027
Filed 5/20/2022

Debtor BLACK WARRIOR MINERALS, INC.
SUITE 107, 109 PITT STREET
SYDNEY 20000

Secured Party COLLINS ST CONVERTIBLE NOTES PTY LTD ACN 657 773 754, AS TRUSTEE
LEVEL 9, 365 LITTLE COLLINS STREET
MELBOURNE 30000

Secured Party COLLINS ST CONVERTIBLE NOTES PTY LTD CAN 657 773 754, AS TRUSTEE
LEVEL 9, 365 LITTLE COLLINS STREET
MELBOURNE 30000

Amendment Type Amendment
File No. 22-7306693_1
Filed 5/23/2022 12:00:00 AM

18. Financing Statement

Document No. 22-7333369 **Lapses** 6/2/2027
Filed 6/2/2022

Debtor BLACK WARRIOR MINERALS, INC.
SUITE 205
BIRMINGHAM AL 35223

Secured Party JOHN DEERE CONSTRUCTION & FORESTRY COMPANY
6400 NW 86TH ST
JOHNSTON IA 50131

19. Financing Statement

Document No. 22-7514586 **Lapses** 8/30/2027
Filed 8/30/2022
Debtor BLACK WARRIOR MINERALS INC
P.O. BOX 1190
SUMITON AL 35148
Secured Party BILL MILLER EQUIPMENT SALES
10200 PARKERSBURG RD
ECKHART MINES MD 21528

20. Financing Statement

Document No. 22-7603452 **Lapses** 10/14/2027
Filed 10/14/2022
Debtor BLACK WARRIOR MINERALS, INC.
2 OFFICE PARK CIRCLE, SUITE 205
MOUNTAIN BROOK AL 35223
Secured Party CORPORATION SERVICE COMPANY, AS REPRESENTATIVE
PO BOX 2576 UCCSPREP@CSCINFO.COM
SPRINGFIELD IL 62708

21. Financing Statement

Document No. 22-7631314 **Lapses** 10/31/2027
Filed 10/31/2022
Debtor BLACK WARRIOR MINERALS, INC.
2 OFFICE PARK CIRCLE, SUITE 205
MOUNTAIN BROOK AL 35223
Secured Party CORPORATION SERVICE COMPANY, AS REPRESENTATIVE
PO BOX 2576 UCCSPREP@CSCINFO.COM
SPRINGFIELD IL 62708

22. Financing Statement

Document No. 22-7655126 **Lapses** 11/15/2027
Filed 11/15/2022
Debtor BLACK WARRIOR MINERALS, INC.
PO BOX 530882
BIRMINGHAM AL 35253
Secured Party CATERPILLAR FINANCIAL SERVICES CORPORATION
2120 WEST END AVENUE
NASHVILLE TN 37203

We assume no liability with respect to the identity of any party named or referred to in this report, nor with respect to the validity, legal effect or priority of any matter shown herein; nor, due to our inability to independently verify the accuracy of this data as provided by government and other sources, do we make any guaranty or representation as to its accuracy.

----- **END OF REPORT** -----

Report Parameters

The UCC Revised Article 9 Model Administrative Rules (MARS) provide state filing offices with a set of guidelines for producing a legally compliant UCC lien search report. The search tool used to create this search report was designed to satisfy the requirements under MARS while providing the searcher with increased flexibility.

Flexible search logic generates a more inclusive search report and addresses the inconsistencies in searches performed within states that did not effectively adopt the MARS guidelines. Further, these specially designed broad-based searching features aid in the location of involuntary liens such as Federal and State Tax Liens and Judgment Liens and liens that may not be located in state databases limited to the MARS guidelines for the reporting of UCCs.

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] UCC DEPARTMENT 888-427-8713	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) JOHN DEERE FINANCIAL 6400 NW 86TH ST JOHNSTON, IA 50131 USA	

Alabama
Sec. Of State
B 21-7610363 FS
Date 10/13/2021
Time 07:41 AM
211013 1 Pg
File \$15.00
Access \$9.75
Conv \$5.50
Total \$30.25
78513730

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME BLACK WARRIOR MINERALS, INC.					
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 4788 HIGHWAY 78			CITY CORDOVA	STATE AL	POSTAL CODE 35550
			COUNTRY USA		
	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION AL	1g. ORGANIZATIONAL ID #, if any	
				<input type="checkbox"/> NONE	

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE
			COUNTRY		
	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any	
				<input type="checkbox"/> NONE	

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME JOHN DEERE CONSTRUCTION & FORESTRY COMPANY					
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 6400 NW 86TH ST			CITY JOHNSTON	STATE IA	POSTAL CODE 50131
			COUNTRY USA		

4. This FINANCING STATEMENT covers the following collateral:

☐ ATTACHMENT

HITACHI EX36 EX3600-7 MINING EXCAVATOR S/N: 007003

CF 29 YARD BUCKET P/N: 29

CF 29 YARD BUCKET P/N: 29

FQSBEAR FIRE SUPPRESSION SYSTEM P/N: ESSION

together with (1) all attachments, accessories and components, repairs and improvements, (2) all accounts, general

intangibles, contract rights and chattel paper relating thereto, and (3) all proceeds, thereto including, without

limitation, insurance, sale, lease and rental proceeds, and proceeds of proceeds.

5. ALTERNATIVE DESIGNATION [if applicable]: ☐ LESSEE/LESSOR ☐ CONSIGNEE/CONSIGNOR ☐ BAILEE/BAILOR ☐ SELLER/BUYER ☐ AG. LIEN ☐ NON-UCC FILING6. ☐ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable] 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [optional] ☐ All Debtors ☐ Debtor 1 ☐ Debtor 2

8. OPTIONAL FILER REFERENCE DATA

4703009

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] CSC 800-858-5294	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) CSC 801 Adlai Stevenson Drive Springfield, IL 62703 USA	

Alabama
Sec. Of State
B 21-7694609 FS
Date 11/23/2021
Time 12:02 PM
211123 2 Pg
File \$15.00
Access \$9.75
Conv \$4.50
Total \$29.25
8436352

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME Black Warrior Minerals, Inc.						
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 4788 HIGHWAY 78			CITY CORDOVA	STATE AL	POSTAL CODE 35550	COUNTRY USA
	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION AL	1g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME						
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME CORPORATION SERVICE COMPANY as REPRESENTATIVE						
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS PO Box 2576 uccsprep@cscinfo.com			CITY Springfield	STATE IL	POSTAL CODE 62708	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

☐ ATTACHMENT

All of the goods, furniture, fixtures, equipment, and other personal property now or hereafter leased to Lessee, wherever located, including but not limited to the following equipment description and all related peripherals to be more fully described on Exhibit A, together with all replacements, additions, substitutions, accessions, modifications, updates, upgrades, revisions, new versions, enhancements, and accessories incorporated therein and/or affixed thereto and all proceeds thereof, (including, but not limited to, amounts payable under any insurance policy) and all other property acquired and accepted by Debtor/Lessee after the filing of this UCC-1 Statement.

Collateral description:

Four Hitachi Zero Hour EH3500 mining trucks, Four used Hitachi EH3500 mining trucks, 20 new tires, de-installation, installation, and transportation costs all

See additional.

5. ALTERNATIVE DESIGNATION [if applicable]:		<input type="checkbox"/> LESSEE/LESSOR	<input type="checkbox"/> CONSIGNEE/CONSIGNOR	<input type="checkbox"/> BAILEE/BAILOR	<input type="checkbox"/> SELLER/BUYER	<input type="checkbox"/> AG. LIEN	<input type="checkbox"/> NON-UCC FILING
6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]		7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [OPTIONAL FEE]		<input type="checkbox"/> All Debtors		<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA 2222 53673							

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME Black Warrior Minerals, Inc.		
OR		
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX

10. MISCELLANEOUS:

Alabama
Sec. Of State

B 21-7694609 FS
Date 11/23/2021
Time 12:02 PM
211123 2 Pg

File \$15.00
Access \$9.75
Conv \$4.50
Total \$29.25
8436352

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME** - insert only one name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME				
OR				
11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID #, if any	
			<input type="checkbox"/> NONE	

12. ☐ ADDITIONAL SECURED PARTY'S or ☐ ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME				
OR				
12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
12c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

13. This FINANCING STATEMENT covers ☐ timber to be cut or ☐ as-extracted collateral, or is filed as a ☐ fixture filing.

14. Description of real estate:

15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

16. Additional collateral description:

acceptable to the Lessor.

17. Check only if applicable and check only one box.Debtor is a ☐ Trust or ☐ Trustee acting with respect to property held in trust or ☐ Decedent's Estate18. Check only if applicable and check only one box.

- ☐ Debtor is a TRANSMITTING UTILITY
- ☐ Filed in connection with a Manufactured-Home Transaction — effective 30 years
- ☐ Filed in connection with a Public-Finance Transaction — effective 30 years

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Wolters Kluwer Lien Solutions 800-331-3282	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 USA	

Alabama
Sec. Of State
B 22-7064124 FS
Date 02/07/2022
Time 11:18 AM
220207 1 Pg
File \$15.00
Access \$9.75
Conv \$4.50
Total \$29.25
8475162

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME BLACK WARRIOR MINERALS, INC.						
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS P.O. Box 1190			CITY Sumiton	STATE AL	POSTAL CODE 35148	COUNTRY USA
	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION AL	1g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME						
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME Caterpillar Financial Services Corporation						
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS 2120 West End Avenue			CITY Nashville	STATE TN	POSTAL CODE 37203	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

☐ ATTACHMENT

(ONE) 1 Caterpillar Year 2010 Model 993K Wheel loader-Large S/N: Z9K00356 And substitutions, replacements, additions and accessions thereto, now owned or hereafter acquired and proceeds thereof. The above collateral is within the scope of Article 9 of the Uniform Commercial Code (if this statement is filed in New Jersey, specifically Chapter 9 of Title 12A, pursuant to 12A:9-102 and 12A:9-109).

5. ALTERNATIVE DESIGNATION [if applicable]:		<input type="checkbox"/> LESSEE/LESSOR	<input type="checkbox"/> CONSIGNEE/CONSIGNOR	<input type="checkbox"/> BAILEE/BAILOR	<input type="checkbox"/> SELLER/BUYER	<input type="checkbox"/> AG. LIEN	<input type="checkbox"/> NON-UCC FILING
6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]		7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [optional]		<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2	
8. OPTIONAL FILER REFERENCE DATA AL-0-84756993-63109314							

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] CSC 800-858-5294	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) CSC 801 Adlai Stevenson Drive Springfield, IL 62703 USA	

Alabama
Sec. Of State
B 22-7068201 FS
Date 02/09/2022
Time 07:59 AM
220209 3 Pg

File	\$15.00
Access	\$9.75
Conv	\$4.50
Total	\$29.25

8476500

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME Black Warrior Minerals, Inc.				
OR	1b. INDIVIDUAL'S LAST NAME			
1c. MAILING ADDRESS 4788 Highway 78		CITY Cordova	STATE AL	POSTAL CODE 35550
ADD'L INFO RE ORGANIZATION DEBTOR		1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION AL	1g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S LAST NAME			
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
ADD'L INFO RE ORGANIZATION DEBTOR		2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME CORPORATION SERVICE COMPANY, AS REPRESENTATIVE				
OR	3b. INDIVIDUAL'S LAST NAME			
3c. MAILING ADDRESS PO BOX 2576UCCSPREP@cscinfo.com		CITY Springfield	STATE IL	POSTAL CODE 62708
ADD'L INFO RE ORGANIZATION DEBTOR		3e. TYPE OF ORGANIZATION	3f. JURISDICTION OF ORGANIZATION	3g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE

4. This FINANCING STATEMENT covers the following collateral:

☐ ATTACHMENT

All equipment, machinery, goods, personal and other property, however described, leased pursuant to Lease Schedule

No. BWMS_001 to Master Lease Agreement No. 2058236, as amended, whether now or hereafter existing, and

wherever now or hereafter located, together with all accessories, attachments, accessions, parts, components, fixtures, repairs, modifications, additions, substitutions, replacements and exchanges thereof, and all related deliverables, intangible

See additional.

5. ALTERNATIVE DESIGNATION [if applicable]: <input checked="" type="checkbox"/> LESSEE/LESSOR <input type="checkbox"/> CONSIGNEE/CONSIGNOR <input type="checkbox"/> BAILEE/BAILOR <input type="checkbox"/> SELLER/BUYER <input type="checkbox"/> AG. LIEN <input type="checkbox"/> NON-UCC FILING				
6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [if applicable] in the REAL ESTATE RECORDS. Attach Addendum <input type="checkbox"/> 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [if applicable] <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2				
8. OPTIONAL FILER REFERENCE DATA 2264 92085				

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME Black Warrior Minerals, Inc.		
OR		
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX

10. MISCELLANEOUS:

Alabama
Sec. Of State

B 22-7068201 FS
Date 02/09/2022
Time 07:59 AM
220209 3 Pg

File	\$15.00
Access	\$9.75
Conv	\$4.50
Total	\$29.25
	8476500

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME** - insert only one name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME				
OR				
11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID #, if any	
			<input type="checkbox"/> NONE	

12. ☐ ADDITIONAL SECURED PARTY'S or ☐ ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME				
OR				
12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
12c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

13. This FINANCING STATEMENT covers ☐ timber to be cut or ☐ as-extracted collateral, or is filed as a ☐ fixture filing.

14. Description of real estate:

15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

16. Additional collateral description:

property, software (embedded or otherwise), general intangibles, intellectual property, license, contract rights, inventory, collateral and other rights incorporated therein, attached thereto, associated therewith or arising therefrom, all whether or not furnished by the Supplier thereof, and any and all proceeds, including proceeds of proceeds,

See additional.

17. Check only if applicable and check only one box.Debtor is a ☐ Trust or ☐ Trustee acting with respect to property held in trust or ☐ Decedent's Estate18. Check only if applicable and check only one box.

- ☐ Debtor is a TRANSMITTING UTILITY
- ☐ Filed in connection with a Manufactured-Home Transaction — effective 30 years
- ☐ Filed in connection with a Public-Finance Transaction — effective 30 years

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME Black Warrior Minerals, Inc.		
OR		
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX

10. MISCELLANEOUS:

Alabama
Sec. Of State

B 22-7068201 FS
Date 02/09/2022
Time 07:59 AM
220209 3 Pg

File \$15.00
Access \$9.75
Conv \$4.50
Total \$29.25
8476500

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME** - insert only one name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME				
OR				
11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID #, if any
				<input type="checkbox"/> NONE

12. ☐ ADDITIONAL SECURED PARTY'S or ☐ ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME				
OR				
12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
12c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

13. This FINANCING STATEMENT covers ☐ timber to be cut or ☐ as-extracted collateral, or is filed as a ☐ fixture filing.

14. Description of real estate:

15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

16. Additional collateral description:

and
products thereof. This filing is made for informational purposes and not to suggest Secured Party's interest is limited to a security interest only. Debtor has no independent right or authority to sell, sublease, transfer, assign, pledge, encumber or dispose of any of the foregoing or any interest therein.

17. Check only if applicable and check only one box.Debtor is a ☐ Trust or ☐ Trustee acting with respect to property held in trust or ☐ Decedent's Estate18. Check only if applicable and check only one box.

- ☐ Debtor is a TRANSMITTING UTILITY
- ☐ Filed in connection with a Manufactured-Home Transaction — effective 30 years
- ☐ Filed in connection with a Public-Finance Transaction — effective 30 years

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
CSC	800-858-5294
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
CSC	
801 Adlai Stevenson Drive	
Springfield, IL 62703	
USA	

Alabama
Sec. Of State

B 22-7068201 AS
Date 09/21/2022
Time 10:11 AM
220921 1 Pg

File \$15.00
Access \$9.75
Conv \$4.50
Total \$29.25
8610192

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE # 22-7068201				1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. <input type="checkbox"/>	
2. <input type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.					
3. <input type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.					
4. <input checked="" type="checkbox"/> ASSIGNMENT (FULL): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.					
5. AMENDMENT (PARTY INFORMATION): This Amendment affects <input type="checkbox"/> Debtor <u>or</u> <input type="checkbox"/> Secured Party of record. Check only <u>one</u> of these two boxes. Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate information in items 6 and/or 7. <input type="checkbox"/> CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b. <input type="checkbox"/> ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).					
6. CURRENT RECORD INFORMATION:					
6a. ORGANIZATION'S NAME					
OR	6b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:					
7a. ORGANIZATION'S NAME					
OR	7b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
7c. MAILING ADDRESS			CITY	STATE	POSTAL CODE COUNTRY
10201 Centurion Parkway North, Suite 100			Jacksonville	FL	32256 USA
ADD'L INFO RE ORGANIZATION DEBTOR		7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if any	
				<input type="checkbox"/> NONE	
8. AMENDMENT (COLLATERAL CHANGE): check only <u>one</u> box. <input type="checkbox"/> ATTACHMENT					
Describe collateral <input type="checkbox"/> deleted or <input type="checkbox"/> added, or give entire <input type="checkbox"/> restated collateral description, or describe collateral <input type="checkbox"/> assigned.					

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT** (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here ☐ and enter name of **DEBTOR** authorizing this Amendment.

9a. ORGANIZATION'S NAME				
CORPORATION SERVICE COMPANY, AS REPRESENTATIVE				
OR	9b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME SUFFIX

10. OPTIONAL FILER REFERENCE DATA

Debtor:Black Warrior Minerals, Inc. 2399 03417

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] CSC 800-858-5294	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) CSC 801 Adlai Stevenson Drive Springfield, IL 62703 USA	

Alabama
Sec. Of State
B 22-7135486 FS
Date 03/14/2022
Time 12:09 PM
220314 1 Pg
File \$15.00
Access \$9.75
Conv \$4.50
Total \$29.25
8496978

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME Black Warrior Minerals, Inc.						
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS PO Box 1190			CITY Sumiton	STATE AL	POSTAL CODE 35148	COUNTRY USA
	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION AL	1g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME						
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME Noreast Capital Corporation						
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS 428 Fourth Street, Suite 1			CITY Annapolis	STATE MD	POSTAL CODE 21403	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:☐ ATTACHMENT

(1) 24' x 56' Modular Office Building with Skirting & (2) Stairs Serial No. 2243215 & 2243216.
Located at Black Warrior
Minerals, Inc. 1550 Sardis Road, Gardendale, AL 35071.

5. ALTERNATIVE DESIGNATION [if applicable]:		<input type="checkbox"/> LESSEE/LESSOR	<input type="checkbox"/> CONSIGNEE/CONSIGNOR	<input type="checkbox"/> BAILEE/BAILOR	<input type="checkbox"/> SELLER/BUYER	<input type="checkbox"/> AG. LIEN	<input type="checkbox"/> NON-UCC FILING
6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]		7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [optional]		<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2	
8. OPTIONAL FILER REFERENCE DATA :66369 2284 29341							

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Laura Brengartner 800-300-5067	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) CCS 3 Claridge Drive Suite 3 VERONA, NJ 07044 USA	

Alabama
Sec. Of State
B 22-7306693 FS
Date 05/20/2022
Time 10:53 AM
220520 1 Pg
File \$15.00
Access \$9.75
Conv \$5.50
Total \$30.25
84033334

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME Black Warrior Minerals, Inc.						
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS Suite 107, 109 Pitt Street			CITY Sydney	STATE	POSTAL CODE 2000	COUNTRY AUS
	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION AL	1g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME						
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME Collins St Convertible Notes Pty Ltd CAN 657 773 754, as Trustee for Collins St Convertible Note Fund						
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS Level 9, 365 Little Collins Street			CITY Melbourne	STATE	POSTAL CODE 3000	COUNTRY AUS

4. This FINANCING STATEMENT covers the following collateral:

All Assets.

☐ ATTACHMENT

5. ALTERNATIVE DESIGNATION [if applicable]:		<input type="checkbox"/> LESSEE/LESSOR	<input type="checkbox"/> CONSIGNEE/CONSIGNOR	<input type="checkbox"/> BAILEE/BAILOR	<input type="checkbox"/> SELLER/BUYER	<input type="checkbox"/> AG. LIEN	<input type="checkbox"/> NON-UCC FILING
6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]		7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [optional]		<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2	
8. OPTIONAL FILER REFERENCE DATA							

For filing with the Alabama Secretary of State/1001424.0001

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Laura Brengartner 800-300-5067	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> CCS 3 Claridge Drive Suite 3 VERONA, NJ 07044 USA </div>	

Alabama
Sec. Of State

B 22-7306693 AM
Date 05/23/2022
Time 03:04 PM
220523 1 Pg

File	\$15.00
Access	\$9.75
Conv	\$5.50
Total	\$30.25

84115266

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
1a. INITIAL FINANCING STATEMENT FILE #
22-7306693

1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. ☐

2. ☐ **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3. ☐ **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4. ☐ **ASSIGNMENT** (): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.

5. **AMENDMENT (PARTY INFORMATION):** This Amendment affects ☐ Debtor or ☒ Secured Party of record. Check only one of these two boxes.
Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.
☒ **CHANGE** name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. ☐ **DELETE** name: Give record name to be deleted in item 6a or 6b. ☐ **ADD** name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).
6. **CURRENT RECORD INFORMATION:**

6a. ORGANIZATION'S NAME COLLINS ST CONVERTIBLE NOTES PTY LTD CAN 657 773 754, AS TRUSTEE			
OR	6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME
			SUFFIX

7. **CHANGED (NEW) OR ADDED INFORMATION:**

7a. ORGANIZATION'S NAME COLLINS ST CONVERTIBLE NOTES PTY LTD ACN 657 773 754, AS TRUSTEE			
OR	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME
			SUFFIX

7c. MAILING ADDRESS LEVEL 9, 365 LITTLE COLLINS STREET		CITY MELBOURNE	STATE	POSTAL CODE 30000-0000	COUNTRY AUS
ADD'L INFO RE ORGANIZATION DEBTOR	7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if any		
			<input type="checkbox"/> NONE		

8. **AMENDMENT (COLLATERAL CHANGE):** check only one box.☐ **ATTACHMENT**Describe collateral ☐ deleted or ☐ added, or give entire ☐ restated collateral description, or describe collateral ☐ assigned.
9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT** (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here ☐ and enter name of **DEBTOR** authorizing this Amendment.

9a. ORGANIZATION'S NAME Collins St Convertible Notes Pty Ltd CAN 657 773 754, as Trustee for Collins St Convertible Note Fund			
OR	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME
			SUFFIX

10. **OPTIONAL FILER REFERENCE DATA**

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] UCC DEPARTMENT 888-427-8713	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) JOHN DEERE FINANCIAL 6400 NW 86TH ST JOHNSTON, IA 50131 USA	

Alabama
Sec. Of State
B 22-7333369 FS
Date 06/02/2022
Time 08:17 AM
220602 1 Pg
File \$15.00
Access \$9.75
Conv \$5.50
Total \$30.25
84362416

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME BLACK WARRIOR MINERALS, INC.						
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS SUITE 205			CITY BIRMINGHAM	STATE AL	POSTAL CODE 35223	COUNTRY USA
ADD'L INFO RE ORGANIZATION DEBTOR		1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION AL	1g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME						
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
ADD'L INFO RE ORGANIZATION DEBTOR		2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME JOHN DEERE CONSTRUCTION & FORESTRY COMPANY						
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS 6400 NW 86TH ST			CITY JOHNSTON	STATE IA	POSTAL CODE 50131	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

☐ ATTACHMENT

JOHN DEERE 844K 844K 4WD LOADER S/N: 671226

TAG 12.0 YD COAL BUCKET P/N: 12.0

TAG 7.75 YD BUCKET P/N: 7.75

together with (1) all attachments, accessories and components, repairs and improvements, (2) all accounts, general

intangibles, contract rights and chattel paper relating thereto, and (3) all proceeds, thereto including, without

limitation, insurance, sale, lease and rental proceeds, and proceeds of proceeds

5. ALTERNATIVE DESIGNATION [if applicable]:		<input type="checkbox"/> LESSEE/LESSOR	<input type="checkbox"/> CONSIGNEE/CONSIGNOR	<input type="checkbox"/> BAILEE/BAILOR	<input type="checkbox"/> SELLER/BUYER	<input type="checkbox"/> AG. LIEN	<input type="checkbox"/> NON-UCC FILING
6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]		7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [optional]		<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2	
8. OPTIONAL FILER REFERENCE DATA 4889010							

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] JENNI BRAKEALL 301-689-1013	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) BILL MILLER EQUIPMENT SALES 10200 PARKERSBURG RD Eckhart Mines, MD 21528 USA	

Alabama
Sec. Of State
B 22-7514586 FS
Date 08/30/2022
Time 09:18 AM
220830 1 Pg
File \$15.00
Access \$9.75
Conv \$5.50
Total \$30.25
86146138

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME BLACK WARRIOR MINERALS INC						
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS P.O. BOX 1190			CITY SUMITON	STATE AL	POSTAL CODE 35148	COUNTRY USA
	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION AL	1g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME						
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME BILL MILLER EQUIPMENT SALES						
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS 10200 PARKERSBURG RD			CITY Eckhart Mines	STATE MD	POSTAL CODE 21528	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

☐ ATTACHMENT
RENTAL/PURCHASE AGREEMENT ("LEASE"), BY AND BETWEEN LESSEE AND BILL MILLER EQUIPMENT SALES, INC., AS LESSOR; ALL RENTS AND OTHER PAYMENTS DUE AND TO BECOME DUE UNDER THE LEASE; AND THE FOLLOWING EQUIPMENT:
CAT D11T DOZER, S/N: GEB516
CAT 988F WHEEL LOADER, S/N: 8YG639
CAT 785C HAUL TRUCK, S/N: 1HW120
CAT 785C HAUL TRUCK, S/N: 1HW121
CAT 785B HAUL TRUCK, S/N: 6HK587
CAT D11T DOZER, S/N: GEB659
CAT 785C HAUL TRUCK, S/N: 6HK583
... TOGETHER WITH ALL PARTS ATTACHMENTS, ACCESSIONS, ADDITIONS, AND REPLACEMENTS AND THE PROCEEDS OF ANY OF THE FOREGOING.

5. ALTERNATIVE DESIGNATION [if applicable]: <input checked="" type="checkbox"/> LESSEE/LESSOR <input type="checkbox"/> CONSIGNEE/CONSIGNOR <input type="checkbox"/> BAILEE/BAILOR <input type="checkbox"/> SELLER/BUYER <input type="checkbox"/> AG. LIEN <input type="checkbox"/> NON-UCC FILING	
6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [optional] <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA	

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] CSC 800-858-5294	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) CSC 801 Adlai Stevenson Drive Springfield, IL 62703 USA	

Alabama
Sec. Of State
B 22-7603452 FS
Date 10/14/2022
Time 03:04 PM
221014 2 Pg
File \$15.00
Access \$9.75
Conv \$4.50
Total \$29.25
8622184

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME Black Warrior Minerals, Inc.						
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 2 Office Park Circle, Suite 205			CITY Mountain Brook	STATE AL	POSTAL CODE 35223	COUNTRY USA
	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION AL	1g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME						
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME CORPORATION SERVICE COMPANY, AS REPRESENTATIVE						
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS PO BOX 2576 UCCSPREP@cscinfo.com			CITY Springfield	STATE IL	POSTAL CODE 62708	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

☐ ATTACHMENT

All equipment, machinery, goods, personal and other property, however described, leased pursuant to Lease Schedule No. BWMS_002 to Master Lease Agreement No. 2058236, as amended, whether now or hereafter existing, and wherever now or hereafter located, together with all accessories, attachments, accessions, parts, components, fixtures, repairs, modifications, additions, substitutions, replacements and exchanges thereof, and all related deliverables, intangible property, software (embedded or otherwise), general intangibles, intellectual property, license, contract rights, inventory, collateral and other rights incorporated therein, attached thereto, associated therewith or arising therefrom, all whether or not furnished by the Supplier thereof, and any and all proceeds, including proceeds of proceeds, and products thereof.

This filing is made for informational purposes and not to suggest Secured

See additional.

5. ALTERNATIVE DESIGNATION [if applicable]: <input checked="" type="checkbox"/> LESSEE/LESSOR <input type="checkbox"/> CONSIGNEE/CONSIGNOR <input type="checkbox"/> BAILEE/BAILOR <input type="checkbox"/> SELLER/BUYER <input type="checkbox"/> AG. LIEN <input type="checkbox"/> NON-UCC FILING	
6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [optional] <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA 2417 27718	

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME Black Warrior Minerals, Inc.		
OR		
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX

10. MISCELLANEOUS:

Alabama
Sec. Of State

B 22-7603452 FS
Date 10/14/2022
Time 03:04 PM
221014 2 Pg

File	\$15.00
Access	\$9.75
Conv	\$4.50
Total	\$29.25

8622184

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME** - insert only one name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME				
OR				
11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID #, if any	
			<input type="checkbox"/> NONE	

12. ☐ ADDITIONAL SECURED PARTY'S or ☐ ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME				
OR				
12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
12c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

13. This FINANCING STATEMENT covers ☐ timber to be cut or ☐ as-extracted collateral, or is filed as a ☐ fixture filing.

14. Description of real estate:

15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

16. Additional collateral description:

Party's interest is limited to a security interest only.
Debtor has no independent right or authority to sell, sublease, transfer, assign, pledge, encumber or dispose of any of the foregoing or any interest therein.

17. Check only if applicable and check only one box.Debtor is a ☐ Trust or ☐ Trustee acting with respect to property held in trust or ☐ Decedent's Estate18. Check only if applicable and check only one box.

- ☐ Debtor is a TRANSMITTING UTILITY
- ☐ Filed in connection with a Manufactured-Home Transaction — effective 30 years
- ☐ Filed in connection with a Public-Finance Transaction — effective 30 years

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] CSC 800-858-5294	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) CSC 801 Adlai Stevenson Drive Springfield, IL 62703 USA	

Alabama
Sec. Of State
B 22-7631314 FS
Date 10/31/2022
Time 11:57 AM
221031 1 Pg
File \$15.00
Access \$9.75
Conv \$4.50
Total \$29.25
8629514

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME Black Warrior Minerals, Inc.						
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 2 Office Park Circle, Suite 205			CITY Mountain Brook	STATE AL	POSTAL CODE 35223	COUNTRY USA
	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION AL	1g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME						
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME CORPORATION SERVICE COMPANY, AS REPRESENTATIVE						
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS PO BOX 2576 UCCSPREP@cscinfo.com			CITY Springfield	STATE IL	POSTAL CODE 62708	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

☐ ATTACHMENT

All deposits, payments and other money pledged, paid, provided to or held by Security Party in connection with Lease Schedule No. BWMS_002 to Master Lease Agreement No. 2058236, between Avtech Capital, LLC and Debtor, as amended, including pursuant to that certain Security Agreement entered in connection therewith, whether now or hereafter existing, and wherever now or hereafter located, together with all deposit accounts and instruments where any of the foregoing are deposited, held or evidenced, and all additions, substitutions, replacements and exchanges thereof, and any and all proceeds, including proceeds of proceeds, thereof.

5. ALTERNATIVE DESIGNATION [if applicable]: <input checked="" type="checkbox"/> LESSEE/LESSOR <input type="checkbox"/> CONSIGNEE/CONSIGNOR <input type="checkbox"/> BAILEE/BAILOR <input type="checkbox"/> SELLER/BUYER <input type="checkbox"/> AG. LIEN <input type="checkbox"/> NON-UCC FILING	
6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [optional] <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA 2429 60024	

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Wolters Kluwer Lien Solutions 800-331-3282	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 USA	

Alabama
Sec. Of State
B 22-7655126 FS
Date 11/15/2022
Time 03:00 PM
221115 1 Pg
File \$15.00
Access \$9.75
Conv \$4.50
Total \$29.25
8636250

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME BLACK WARRIOR MINERALS, INC.						
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS PO BOX 530882			CITY Birmingham	STATE AL	POSTAL CODE 35253	COUNTRY USA
	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION AL	1g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME						
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME Caterpillar Financial Services Corporation						
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS 2120 West End Avenue			CITY Nashville	STATE TN	POSTAL CODE 37203	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:☐ ATTACHMENT

ONE (1) Caterpillar Year 2019 Model 390FL Large Hydraulic Excavator S/N: HNG00333 And substitutions, replacements, additions and accessions thereto, now owned or hereafter acquired and proceeds thereof. The above collateral is within the scope of Article 9 of the Uniform Commercial Code (if this statement is filed in New Jersey, specifically Chapter 9 of Title 12A, pursuant to 12A:9-102 and 12A:9-109).

5. ALTERNATIVE DESIGNATION [if applicable]:		<input type="checkbox"/> LESSEE/LESSOR	<input type="checkbox"/> CONSIGNEE/CONSIGNOR	<input type="checkbox"/> BAILEE/BAILOR	<input type="checkbox"/> SELLER/BUYER	<input type="checkbox"/> AG. LIEN	<input type="checkbox"/> NON-UCC FILING
6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]		7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [optional]		<input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2			
8. OPTIONAL FILER REFERENCE DATA AL-0-89903700-65283746							